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7

8 **BEFORE THE**
9 **MEDICAL BOARD OF CALIFORNIA**
10 **DEPARTMENT OF CONSUMER AFFAIRS**
STATE OF CALIFORNIA

11 In the Matter of the Accusation)	NO. D-5345
Against:)	
)	L-61242
12 John A. Udall, M.D.)	
13 17821 Pioneer Boulevard)	<u>STIPULATION FOR</u>
14 Artesia, California 90701,)	<u>SURRENDER OF LICENSE</u>
)	
15 Physician and Surgeon's)	
Certificate No. G-05477)	
)	
16 Physician Assistant Supervisor)	
License No. SA16566)	
)	
17 Respondent.)	
)	

19
20 IT IS HEREBY STIPULATED AND AGREED BY AND BETWEEN THE
21 PARTIES TO THE ABOVE-ENTITLED MATTER THAT:

22 1. Dixon Arnett, complainant, is the Executive
23 Director of the Medical Board of California, Department of
24 Consumer Affairs ("Board") and is represented by Daniel E.
25 Lungren, Attorney General of the State of California by
26 Sanford H. Feldman, Deputy Attorney General.

27 ///

1 2. John A. Udall, M.D. ("respondent") is represented
2 in this matter by Henry Lewin, Esq. Respondent has discussed
3 with his counsel the effect of this Stipulation, which respondent
4 has carefully read and fully understands.

5 3. Respondent has received and read the Accusation
6 which is presently on file and pending in Case Number D-5345
7 before the Board, a copy of which is attached as Exhibit A.

8 4. Respondent understands the nature of the charges
9 alleged in the Accusation and that, if proven at a hearing, such
10 charges and allegations would constitute cause for imposing
11 discipline upon respondent's licenses issued by the Board.

12 5. Respondent, having completed his career in
13 medicine, has retired from practice. While respondent contends
14 that he did not engage in any of the acts of unprofessional
15 conduct alleged in the Accusation, he enters into this
16 Stipulation because he no longer desires to practice medicine,
17 and because he wishes to avoid the expense of a hearing.

18 6. Respondent understands that in signing this
19 Stipulation rather than contesting the Accusation, he is enabling
20 the Medical Board of California of the State of California to
21 issue its order accepting the surrender of his licenses without
22 further process.

23 7. Respondent and his counsel are aware of each of
24 respondent's rights, including the right to a hearing on the
25 charges and allegations, the right to confront and cross-examine
26 witnesses who would testify against respondent, the right to
27 present evidence in his favor and call witnesses on his behalf,

1 or to testify, the right to contest the charges and allegations,
2 and other rights which are accorded to respondent pursuant to the
3 California Administrative Procedure Act (Gov. Code, § 11500 et
4 seq.), including the right to seek reconsideration, review by the
5 superior court, and appellate review.

6 8. Respondent freely and voluntarily waives each and
7 every one of the rights set forth above, and respondent hereby
8 surrenders Physician and Surgeon's Certificate G-05477 and
9 Physician Assistant Supervisor License No. SA16566 for the
10 Board's formal acceptance.

11 9. Upon acceptance of this Stipulation by the Board,
12 respondent agrees to surrender and cause to be delivered to the
13 Board both his physician and surgeon license and wallet
14 certificate, and his physician assistant supervisor license.
15 Respondent further understands that when the Board accepts the
16 surrender of both licenses, he will no longer be permitted to
17 practice as a physician and surgeon nor to supervise physician
18 assistants in California.

19 10. Respondent fully understands and agrees that in
20 acting upon any application for relicensure or reinstatement
21 which respondent ever files in the State of California, the Board
22 shall deem all of the charges and allegations contained in
23 Accusation No. D-5345, to be true and correct and admitted by
24 respondent.

25 11. All stipulations and recitals contained in this
26 stipulation are made solely and exclusively for the purpose of
27 settlement of Accusation No. D-5345 against John A. Udall, M.D.

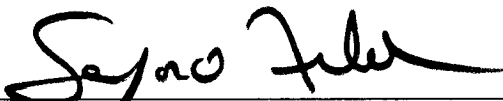
1 In the event that this stipulation is rejected for any reason by
2 the Board, it will be of no force or effect for either party.

3 12. Respondent agrees that, in order to facilitate the
4 acceptance of this stipulation, counsel for complainant may
5 communicate directly with the Board, and that such communication
6 shall not disqualify the Board from further consideration of this
7 case in the event the stipulation is not accepted by the Board.

8 I concur in the stipulation.


9 DATED: 12/13/94

10 DANIEL E. LUNGREN, Attorney General
11 of the State of California

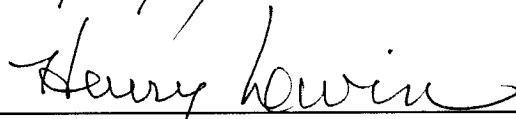
12 
13 Sanford H. Feldman
14 Deputy Attorney General

15 Attorneys for Complainant

16 DATED: 11-26-94

17 
18 John A. Udall, M.D.
19 Respondent

20 DATED: 11/26/94

21 
22 Henry Lewin, Esq.
23 Attorney for Respondent

1 I, John A. Udall, M.D., having carefully read the above
2 Stipulation and having entered into it freely on advice of
3 counsel, and with full knowledge of its force and effect, do
4 hereby surrender my certificate of licensure, No. G-05477, and my
5 physician assistant license, No. SA16566, to the Medical Board of
6 California, for its formal acceptance. By surrendering my
7 licenses, I recognize that upon formal acceptance by the Board, I
8 will lose all rights and privileges to practice as a physician
9 and surgeon and physician assistant supervisor in the State of
10 California.

11 DATED:

11/26/94

John A. Udall MD

John A. Udall, M.D.
Respondent

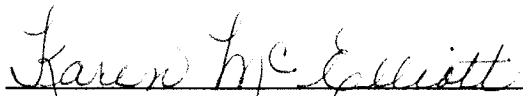
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ORDER OF THE BOARD

The surrender of Physician and Surgeon's Certificate
G-05477, and Physician Assistant Supervisor License SA16566, by
respondent, John A. Udall, M.D., is accepted by the Medical Board
of California, Department of Consumer Affairs of the State of
California.

This decision shall become effective on the 19th day
of May, 1995.

It is so ordered this 19th day of April, 1995.


KAREN MCELLIOTT, President
FOR THE MEDICAL BOARD OF CALIFORNIA
Division of Medical Quality

SHF:cai
03573160-LA93AD1028

1 DANIEL E. LUNGREN, Attorney General
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2 Jaime R. Román, Deputy Attorney General
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3 300 South Spring Street, 10th Floor-North
Los Angeles, California 90013-1204
4 Telephone: (213) 897-2581

5 Attorneys for Complainant

6
7 **BEFORE THE**
8 **MEDICAL BOARD OF CALIFORNIA**
9 **DIVISION OF MEDICAL QUALITY**
DEPARTMENT OF CONSUMER AFFAIRS
STATE OF CALIFORNIA

10 In the Matter of the Accusation) NO. D-5345
Against:)
11)
12 JOHN A. UDALL, M.D.) A C C U S A T I O N
17821 Pioneer Boulevard)
Artesia, California 90701)
13)
Physicians and Surgeons)
14 Certificate No. G-05477,)
15 Physician Assistant Supervisor)
License No. SA16566,)
16)
Respondent.)
17)
18)

18 The Complainant alleges:

19 PARTIES

20 1. Complainant, Dixon Arnett, is the Executive Director of
21 the Medical Board of California (hereinafter the "Board") and he
22 brings this Accusation solely in his official capacity.

23 2. On or about August 10, 1959, Physician's & Surgeon's
24 Certificate No. G-05477 was issued by the Board to John A. Udall,
25 M.D., (hereinafter "respondent"), and at all times relevant to
26 the charges brought herein, said license has been in full force
27

1 and effect.

2 3. On or about June 27, 1988, Physician Assistant Supervisor
3 License No. SA16566 was issued by the Physician Assistant
4 Examining Committee to respondent. Since on or about May 31,
5 1990, Physician Assistant Supervisor License No. SA16566 issued
6 to respondent has been in a delinquent status.

7 JURISDICTION

8 3. This Accusation is brought under the authority of the
9 following sections of the California Business & Professions Code
10 (hereinafter referred to as "the Code").

11 4. Pursuant to sections 2220 and 2227 of the Code, the
12 Division of Medical Quality (hereinafter referred to as "the
13 Division") is authorized to take disciplinary action against
14 physicians and surgeons.

15 5. Section 2227 of the Code provides that the Board may
16 revoke, suspend for a period not to exceed one year, or place on
17 probation, the license of any licensee who has been found guilty
18 under the Medical Practice Act.

19 6. Section 2234 of the Code provides that unprofessional
20 conduct includes, but is not limited to, the following:

- 21 (b) Gross negligence.
22 (c) Repeated negligent acts.
23 (d) Incompetence.

24 FIRST CAUSE OF ACTION

25 7. Respondent is subject to disciplinary action under
26 section 2234(b) of the Code in that he committed various acts of
27 gross negligence on patient S.A (hereinafter referred to as

1 "patient"). The facts and circumstances are as follows:

2 Patient S.A.

3 A. Preliminary Factual Allegations

4 (1) On or about September 17, 1987, patient, a 47 year old
5 female, was seen in consultation by the respondent while
6 hospitalized for chest pain.

7 (a) Respondent diagnosed a subendocardial infarction.

8 (b) Respondent followed the patient while hospitalized
9 and on or about September 19, 1987, noted her blood
10 pressure remained low.

11 (c) On or about September 20, 1987, patient displayed
12 a marked first degree AV block with episodes of super-
13 ventricular tachycardia, evolving into atrioventricular
14 dissociation.

15 (d) On or about September 21, 1987, respondent noted
16 patient's EKG indicated an incomplete coronary occlu-
17 sion and an unstable myocardial infarction. Respondent
18 thereupon inserted a temporary transvenous demand pace-
19 maker.

20 (e) On or about September 26, 1987, respondent noted
21 patient's left ventricular ejection fraction was low
22 at 25% and a scan showed generalized left ventricular
23 hypokinesis.

24 (f) On or about September 27, 1987, respondent
25 recommended patient be discharged. Respondent gave
26 patient an appointment to see him in one week.

27 (g) On or about October 1, 1987, patient saw

1 respondent in his medical office for chest pain.

2 (1) Patient reported to respondent that her
3 chest pain had been through the previous night.

4 (2) Patient's EKG at respondent's medical
5 office showed marked ST depression in V2 to V6.

6 (3) Patient was immediately hospitalized and
7 admitted to the Coronary Care Unit at Pioneer
8 Hospital on or about October 1, 1987 at 5:45 p.m.

9 (h) On or about October 1, 1987, at 6:38 p.m.,
10 patient died.

11 B. Allegation of Gross Negligent Treatment

12 (1) Respondent failed to properly discharge patient.

13 (a) Respondent failed to conduct a predischage
14 graded exercise test of patient.

15 (b) Respondent failed to provide an ambulatory
16 holter to assess patient's functional cardiac reserve.

17 (2) Respondent failed to properly diagnose the severity of
18 patient's condition.

19 (3) Respondent hospitalized patient at an institution that
20 lacked cardiac catheterization or cardiac surgical
21 facilities.

22 8. Respondent is subject to disciplinary action under
23 section 2234(c) of the Code in that he engaged in unprofesional
24 conduct by repeated acts of negligence departing from the
25 standard of practice in his care and treatment of patient S.A..
26 The facts and circumstances are as follows:
27

1 A. Allegation of Repeated Acts of Negligent Treatment

2 Complainant incorporates by reference paragraph 7 as
3 though fully set forth herein.

4 SECOND CAUSE OF ACTION

5 9. Respondent is subject to disciplinary action under
6 section 2234(c) of the Code in that he committed various repeated
7 acts of negligence on patient S.S. (hereinafter referred to as
8 "patient"). The facts and circumstances are as follows:

9 Patient S.S.

10 A. Preliminary Factual Allegations

11 (1) On or about May 25, 1989, patient a 57 year old female,
12 was seen by the respondent complaining of chest pain upon
13 referral from another physician.

14 (2) On or about May 25, 1989, respondent, having examined
15 patient, noted a history of peptic ulcer disease,
16 diagnosed costochondritis and recommended that patient
17 continue with her anti-ulcer medication, and recommended
18 no additional treatment. He returned patient to her
19 referring physician.

20 (3) On or about June 5, 1989, patient was again seen by
21 respondent complaining of increasing chest pain in both
22 frequency and severity.

23 (a) Respondent noted that nitroglycerin provided
24 patient with immediate relief of pain.

25 (b) Respondent noted that patient had worsening
26 anterior chest pains.

27 (i) Respondent noted that patient lacked

1 energy.

2 (ii) Respondent observed that patient had
3 shortness of breath on exertion.

4 (iii) Respondent noted that patient's chest
5 pains awakened her two to three times per night.

6 (iv) Respondent's physical examination of
7 patient revealed tenderness of the left sternal
8 border.

9 (4) On or about June 5, 1989, respondent, having again
10 examined patient, diagnosed costochondritis, and ordered no
11 additional studies.

12 (5) Approximately four hours after patient saw the
13 respondent, she suffered a myocardial infarction and was
14 hospitalized. A cardiac catheterization was performed on
15 patient on or about June 13, 1989, and revealed an occluded
16 right coronary artery. A left ventriculogram revealed an
17 inferior wall akinesis with ventricular dysfunction.

18 B. Allegation of Negligent Treatment

19 (1) Respondent failed to properly diagnose patient's
20 condition.

21 (a) Respondent failed to elicit further descrip-
22 tive symptoms of patient.

23 (b) Respondent failed to respond to patient's
24 relief from nitroglycerin.

25 (c) Respondent failed to conduct simple exercise
26 testing between on or about May 25, 1989 and June 5,
27 1989.

1 (2) Respondent failed to promptly admit patient for
2 hospitalization.

3 THIRD CAUSE OF ACTION

4 10. Respondent is subject to disciplinary action under
5 section 2234(c) of the Code in that he engaged in unprofessional
6 conduct by repeated acts of negligence departing from the
7 standard of practice in his care and treatment of patient R.S.
8 (hereinafter referred to as "patient"). The facts and
9 circumstances are as follows:

10 Patient R.S.

11 A. Preliminary Factual Allegations

12 (1) On or about December 18, 1987, patient, a 57 year old
13 male, was admitted to Lakewood Hospital by the respondent
14 for a left heart catheterization and coronary angiograms
15 from Pioneer Hospital where respondent had been treating
16 patient.

17 (a) Respondent diagnosed preinfarction ventricular
18 angina.

19 (b) Respondent carried out a left heart catheteriza-
20 tion and coronary angiograms. Respondent's
21 assessment found severe left ventricular dysfunction
22 and arteriosclerotic heart disease.

23 (c) Respondent discharged patient on or about
24 December 18, 1987, with a discharge diagnosis of
25 arteriosclerotic heart disease of a moderately
26 severe degree with angina pectoris.

27 (2) On or about December 31, 1987, patient saw respondent

1 at his medical office complaining of chest pain.

2 (a) Respondent diagnosed the pain to be related to
3 rib origin.

4 (b) Respondent prescribed analgesics and a heating
5 pad to patient.

6 (3) On or about January 13, 1988, patient suffered an
7 acute myocardial infarction and died.

8 B. Allegation of Repeated Acts of Negligent Treatment

9 (1) Respondent failed to properly discharge patient.

10 (a) Respondent failed to conduct a pre-discharge
11 graded exercise test of patient.

12 (b) Respondent failed to provide an ambulatory
13 holter to assess patient's functional cardiac reserve.

14 (2) Respondent failed to properly diagnose the severity of
15 patient's condition.

16 (3) Respondent failed to monitor a missed post-discharge
17 patient medical office appointment at a time during which
18 the patient was permitted unrestricted activities.

19 FOURTH CAUSE OF ACTION

20 11. Respondent is subject to disciplinary action under
21 section 2234(d) of the Code in that he was incompetent in the
22 practice of his profession. The facts and circumstances are as
23 follows:

24 (a) Complainant incorporates by reference paragraphs 7, 9
25 and 10 as though fully stated herein.

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